



STATE OF TENNESSEE
BUREAU OF TENNCARE
DEPARTMENT OF FINANCE & ADMINISTRATION
310 Great Circle Road
NASHVILLE, TENNESSEE 37243

CHECKLIST

Non-Emergency Transportation Providers

This Checklist will assist you in completing and returning the correct forms along with this document.
Enrollment Packets must include the following:

No. 4 Non-Emergency Transportation Application

Disclosure of Ownership and Control Interest Statement

Substitute W-9 Form

Copy Of Business License

Copy of Commercial Liability Insurance

List the name(s) of all transportation drivers

Drivers license number/date of expiration
